BEST AVAILABLE COPY

POSITION	INITIALS	ID NO.	DATE	
FEE DETERMINATION	KAI	W.	alla	
O.I.P.E. CLASSIFIER	7/1	1011 47	16/2/2	
FORMALITY REVIEW	80,	827	10-25-00	
RESPONSE FORMALITY REVIEW	Hri	351	03-36-0	

INDEX OF CLAIMS

~	Rejected	N	Non-elected
=	Allowed	- 1	Interference
_	(Through numeral) Canceled	Α	Appeal
÷	Restricted	0	Objected

÷ Hestricted U									
Claim Date	Claim	Date	Claim	Date					
Fine of the state	Final Original		Final Original						
3 / J	52 53		102						
(4 1 1 1	54		104						
6	55	++++	106						
8	57		107						
9	59		109						
:11	60		110						
13	62		112						
14	64		114						
16	66		116						
718)	68		117						
19 9 9	70		119						
21 22	71 72		121						
23	73		122						
25	74 75		124	+++++					
26 27	76		126 127						
28	78 79		128						
30	80		130						
31 32	81 82		131						
34	83 84		133 134						
35	85 86		135						
37	87		137						
39	88		138						
40 41	90		140						
42 43	92		142						
44	93		143						
46	95 96		145						
48	97 98		147						
49	99		. 149						
50 3	100		150						

If more than 150 claims or 10 actions staple additional sheet here